

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission Filers)

2 Total pages filed:

1920

OFFICE USE ONLY

Date Received

2014 DEC 3

AUSTIN CITY CLERK
RECEIVED

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

FBI 4 16

Date Imaged

**3 CANDIDATE /
OFFICEHOLDER
NAME**

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Pio

Sabino

Renteria

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1511 Haskell St.
Austin, TX 78702
☐ change of address

**5 CANDIDATE/
OFFICEHOLDER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(512) 478-6770

**6 CAMPAIGN
TREASURER
NAME**

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Valdes

Cristina

**7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)**

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

902 E 2nd St. Austin TX 78702

**8 CAMPAIGN
TREASURER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(512) 789-0309

9 REPORT TYPE
☐ January 15

☐ 30th day before election

☒ Runoff

☐ 15th day after campaign
treasurer appointment
(officeholder only)

☐ July 15

☒ 8th day before election

☐ Exceeded \$500
limit

☐ Final report (Attach C/OH - FR)

**10 PERIOD
COVERED**

Month

Day

Year

10/26/2014

THROUGH

Month

Day

Year

12/6/2014

11 ELECTION

ELECTION DATE

Month

Day

Year

12/16/2014

ELECTION TYPE

☐ Primary

☒ Runoff

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)
Austin City Council
District 3
GOTO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Sabino P. Renteria 15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$1,085.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$42,358.58

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$1,786.18

4. TOTAL POLITICAL EXPENDITURES

\$13,421.58

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$34,551.88

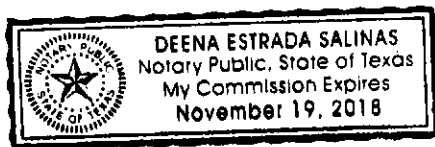
OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$1,300.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Sabino P. Renteria
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sabino Renteria, this the 8th day of December, 20 14, to certify which, witness my hand and seal of office.

Deena Estrada Salinas
Signature of officer administering oath

Deena Estrada Salinas
Printed name of officer administering oath

Notary Public
Title of officer administering oath

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

Sabino Pio Renteria

3 ACCOUNT # (Ethics Commission Filers)

4

TOTAL OF UNITEMIZED LOANS:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date of loan

10/27/2014

7 Name of lender

☐ out-of-state PAC (ID#: _____)

Sabino Pio Renteria

9 Loan Amount (\$)

300.00

6 Is lender
a financial
Institution?

Y

(N)

8 Lender address; City; State; Zip Code

1511 Haskell St.

Austin, TX 78702

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☒ none

15 Check if personal funds were deposited into political account

☒16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☐ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID#: _____)

Loan Amount (\$)

Is lender
a financial
Institution?

Y

N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political account

☐GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 10 11	
2 FILER NAME Sabino Pio Renteria		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/6/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Gilberto VALASQUEZ	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1908 Holly St. Austin TX 78702		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 12/1/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Charles A. March	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2408 Windsor Austin TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) ENDRAVOR Real Estate	
Date 12/5/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dorsey Barger	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3300 Gounille Austin TX 78702		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/19/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: John HAY	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1803 Polo Austin TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) HAY COMPANY	
Date 11/20/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rudy Colmenero	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 LAUNCA #607 Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mitchell Colmenero	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Sabino Pio Renteria</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/1/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>David Roche</i>	7 Amount of contribution (\$) <i>350.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1600 Mount Larson Austin TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Real Estate</i>		10 Employer (See Instructions) <i>Endeavor Real Estate</i>	
Date <i>11/27/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Andrew Pastor</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2908 Sparkling Brook Austin TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Real Estate</i>		Employer (See Instructions) <i>Endeavor Real Estate</i>	
Date <i>12/3/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jesse Malone</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>207 Cumberland Austin TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Malone Wheeler</i>	
Date <i>12/20/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>MARIA LUISA CONCHOLA</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1900 Eastside Austin TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>12/3/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Sarah McElvany</i>	Amount of contribution (\$) <i>150.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7633 Rockpoint Austin TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Sabreu Pio Renteria

3 ACCOUNT # (Ethics Commission Filers)

4 Date

11/21/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Kerry & Becky Getter

6 Contributor address; City, State, Zip Code

9301 Johnny Morris Austin TX 78724

7 Amount of contribution (\$)

700.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

CEO + Controller

10 Employer (See Instructions)

Balcomies Resources

Date

11/23/14

Full name of contributor

☐ out-of-state PAC (ID#)

Daniel Campbell

Contributor address; City, State, Zip Code

6511 Hillside Hollow
Austin TX 78750

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/20/14

Full name of contributor

☐ out-of-state PAC (ID#)

Sarah Andre

Contributor address; City, State, Zip Code

702 San Antonio Austin TX 78701

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18/14

Full name of contributor

☐ out-of-state PAC (ID#)

PATRICIA GONZALES

Contributor address; City, State, Zip Code

P.O. Box 1010 Brownsville TX 78522

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/20/14

Full name of contributor

☐ out-of-state PAC (ID#)

Benjamin Bufkin

Contributor address; City, State, Zip Code

1208 Piedmont Austin 78701

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Gabino Pio Montero</i>		3 ACCOUNT # (Ethics Commission Filters)	
4 Date <i>11/18/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Richard De Palma</i>	7 Amount of contribution (\$) <i>60.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City, State; Zip Code <i>7821 Wisteria Valley Austin TX 78739</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>11/19/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Melissa Whaley</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)
Contributor address; City, State; Zip Code <i>1403 Foxwood CV Austin TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Austrian Permit Service</i>	
Date <i>11/14/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Karen Burns & Paula Greenfield</i>	Amount of contribution (\$) <i>700.00</i>	In-kind contribution description (if applicable)
Contributor address; City, State; Zip Code <i>801 West #100 Austin TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Owner / CEO Real Estate</i>		Employer (See Instructions) <i>UrbanScape Real Estate + Interiors</i>	
Date <i>11/12/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>ERIC GOFF</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)
Contributor address; City, State; Zip Code <i>2500 E 2nd Austin TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Co-founder</i>		Employer (See Instructions) <i>Austin Compost</i>	
Date <i>11/21/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>JENNIFER GARCIA</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)
Contributor address; City, State; Zip Code <i>11728 Lakewood Austin TX 78738</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Self KB Pike</i>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Sabino P. Benteria

3 ACCOUNT # (Ethics Commission Filers)

4 Date

11/7/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Daniel Keshet

6 Contributor address; City; State; Zip Code

301 E 4th # 309

Austin TX 78701

7 Amount of contribution (\$)

350.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Developer

10 Employer (See Instructions)

OCU

Date

11/10/14

Full name of contributor

☐ out-of-state PAC (ID#)

Gloria Maye

Contributor address; City; State; Zip Code

P.O. Box 2505 Austin TX 78768

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Director

Employer (See Instructions)

Texas Democratic Party

Date

11/5/14

Full name of contributor

☐ out-of-state PAC (ID#)

Jonathan Weinstein

Contributor address; City; State; Zip Code

P.O. Box 6380 Austin TX 78762

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

Automotive Recycling

Date

11/5/14

Full name of contributor

☐ out-of-state PAC (ID#)

Max E. Elliott

Contributor address; City; State; Zip Code

726 Guenter Austin TX 78702

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/21/14

Full name of contributor

☐ out-of-state PAC (ID#)

Gabriel Bruehl

Contributor address; City; State; Zip Code

18015. McPAC #100 Austin TX 78746

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

KB Pike

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A:	
2 FILER NAME <i>Sabino P. Anteria</i>				3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/6/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>DAVID BREARLEY</i>		7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <i>1368 E 2nd Austin TX 78702</i>			(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date <i>11/6/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>ORLANDO S. MATA</i>		Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>1301 S IH 35 #304 Austin TX 7874</i>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <i>11/9/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>William B Greif</i>		Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>807 E 31 Austin TX 78705</i>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) <i>Real Estate</i>			Employer (See Instructions) <i>Self</i>		
Date <i>11/11/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Kathy Setzer</i>		Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>3400 Santa Monica Austin TX 78741</i>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) <i>owner/GM</i>			Employer (See Instructions) <i>Hywood Hotel</i>		
Date <i>11/11/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Richard Hatfield</i>		Amount of contribution (\$) <i>150.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>5403 Musket Ridge Austin TX 78759</i>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Sabine Pro Rateria

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

12/1/14

Christopher T. Ellis

6 Contributor address; City, State; Zip Code

4408 Long Camp #10 Austin TX 78746

350.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Real Estate

10 Employer (See Instructions)

Endeavor Real Estate

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/18/14

Stone Wall Democrats of Austin P.A.C.

Contributor address; City, State; Zip Code

P.O. Box 40878 Austin TX 78704

100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/18/14

Alfred Stanley

Contributor address; City, State; Zip Code

P.O. Box 5674 Austin TX 78763

100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/11/14

South Austin Democrats

Contributor address; City, State; Zip Code

P.O. Box 152592 Austin TX 78715

250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

PAC

Employer (See Instructions)

South Austin Democrats

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/13/14

IBEW PAC Voluntary Fund

Contributor address; City, State; Zip Code

900 Seventh St. NW
Washington DC 20001

350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

PAC

Employer (See Instructions)

IBEW PAC

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Sabino Pio Renteria</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/1/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <i>Sylvia Camarillo</i>	7 Amount of contribution (\$) <i>100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>P.O. Box 9632 Austin TX 78766</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>11/28/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <i>Shudde Fath</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1005 Bluebonnet Ln Austin TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)	
Date <i>12/1/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <i>Gilbert M. Martinez</i>	Amount of contribution (\$) <i>75.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10113 Dobbin Austin TX 78748</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>11/12/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <i>Sewah J. Archer</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2921 Gouville Austin TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>11/11/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <i>Austin APT Assoc PAC Committee</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4107 Medical Pkwy #100 Austin TX 78756</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>PAC</i>		Employer (See Instructions) <i>Austin APT Association</i>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:	
2 FILER NAME <i>Sabino Pio Renteria</i>			3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/25/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Michael T. Valesout Cornalessmith</i>	7 Amount of contribution (\$) <i>700.00</i>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <i>4803 Allison CV Austin TX 78741</i>		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions) <i>Retired</i>		10 Employer (See Instructions)		
Date <i>11/18/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>STEFAN J WRAY</i>	Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>6911 Villita Avenia Austin TX 78741</i>		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) <i>GM</i>		Employer (See Instructions) <i>Channel Austin</i>		
Date <i>11/17/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>ARNOLD A COHEN</i>	Amount of contribution (\$) <i>150.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>6711 Winterberry Austin TX 78750</i>		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date <i>11/23/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>LARRY G. WATERHOUSE</i>	Amount of contribution (\$) <i>200.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>11113 Champions Ln Austin TX 78747</i>		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions)		
Date <i>11/24/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>SU LINNA PAC</i>	Amount of contribution (\$) <i>350.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>5555 N Lamar Blvd #E121 Austin TX 78751</i>		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) <i>PAC</i>		Employer (See Instructions) <i>SU LINNA PAC</i>		

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Sabino Pio Anterica

3 ACCOUNT # (Ethics Commission Filers)

4 Date

11/24/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Southwest Laborers District Council

6 Contributor address; City, State, Zip Code

11720 E 21st #0 Tulsa, OK 74129

7 Amount of contribution (\$)

350.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

PAC

10 Employer (See Instructions)

South West Laborers District Council

Date

11/12/14

Full name of contributor

☐ out-of-state PAC (ID#)

LNN-PAC

Contributor address; City, State, Zip Code

2925 Briar Park W F100V
Houston TX 77042

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

PAC

Employer (See Instructions)

LNN PAC

Date

11/17/14

Full name of contributor

☐ out-of-state PAC (ID#)American Federation of State, County
and Municipal Employees A.F.L.C.I.O.

Contributor address; City, State, Zip Code

1625 L Street N.W.
Washington, DC 20036

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

PAC

Employer (See Instructions)

AFSCME AFI CIO

Date

10/25/14

Full name of contributor

☐ out-of-state PAC (ID#)

RYAN DURAN

Contributor address; City, State, Zip Code

2205 Bonita Austin TX 78703

Amount of contribution (\$)

160.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/14

Full name of contributor

☐ out-of-state PAC (ID#)

JEFFREY THOMPSON

Contributor address; City, State, Zip Code

1408 Willow Austin TX 78702

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Sabino Pio Renteria		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/21/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) City of Austin	7 Amount of contribution (\$) 27,988.58	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 301 W. 2nd St. Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: City: State: Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: City: State: Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: City: State: Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address: City: State: Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 6		2 FILER NAME Sabino P. O. Renteria		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/5/14		5 Payee name Brandy Eileen			
6 Amount (\$) \$132.00		7 Payee address; City; State; Zip Code 300 Herrin St. Covland, TX, 78615			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/contract labor		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12/5/14		Payee name Sarah Beckham			
Amount (\$) \$275.00		Payee address; City; State; Zip Code 5338 Painted Shield Dr., Austin, TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/contract labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12/5/14		Payee name Michael Cavazos			
Amount (\$) \$187.00		Payee address; City; State; Zip Code 16314 Hill Country Dr Leander, TX 78641			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/contract labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12/4/14		Payee name Chris Ntaertzes			
Amount (\$) \$168.00		Payee address; City; State; Zip Code 16314 Hill Country Dr. Leander, TX, 78641			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/contract labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11/28/14		2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/28/14		5 Payee name Jonathan Hernandez			
6 Amount (\$) \$ 546.00		7 Payee address; City; State; Zip Code 5310 Apple Orchard Ln, Austin, TX, 78744			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/contract labor		(b) Description (if travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/28/14		Payee name Michael Cavaos			
Amount (\$) \$1041.50		Payee address; City; State; Zip Code * 16314 Hill Country Dr Leander, TX 78641 * 18618 Martinique Dr Houston, TX 77058			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/contract labor		Description (if travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/28/14		Payee name David Chincanchan			
Amount (\$) \$1500.00		Payee address; City; State; Zip Code 48 4908 Parell Path Austin, TX, 78744			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Wages/contract labor		Description (if travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/24/14		Payee name HEB			
Amount (\$) \$112.36		Payee address; City; State; Zip Code 2508 E. Riverside Dr. 78741			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage Expenses		Description (if travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/5/14		5 Payee name Marcela Andre			
6 Amount (\$) \$302.50		7 Payee address; City; State; Zip Code PO BOX 6808, Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Contract labor		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11/28/14		Payee name Nicholas D. Solorzano			
Amount (\$) \$1250.00		Payee address; City; State; Zip Code 2825 Mollimar Dr. Plano, TX, 75075			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/Contract labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11/28/14		Payee name Chris Gonzales			
Amount (\$) \$192.00		Payee address; City; State; Zip Code 1601 E. 5th St #111, Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/Contract labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/26/14		Payee name Sams Club			
Amount (\$) \$196.99		Payee address; City; State; Zip Code 9900 S IH 35 Frontage Rd. Austin, TX 78748			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage Expenses		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/24/14		5 Payee name Walgreens			
6 Amount (\$) \$162.71		7 Payee address; City; State; Zip Code 6721 S. Congress Ave. Austin, TX, 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage Expenses		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/4/14		Payee name Planning and Development			
Amount (\$) \$137.00		Payee address; City; State; Zip Code 505 Barton Springs Austin, TX, 78204			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/14/14		Payee name HEB			
Amount (\$) \$136.96		Payee address; City; State; Zip Code 2508 E. Riverside Dr. 78741			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/6/14		Payee name Lexmark Check Mark Typesetting			
Amount (\$) \$884.35		Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX, 78722			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expenses		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/5/14		5 Payee name Meg McCann			
6 Amount (\$) \$264.00		7 Payee address; City; State; Zip Code 4613 Everest Ln Austin, TX, 78727			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Contract labor		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/5/14		Payee name Aaron Mendonza			
Amount (\$) \$192.00		Payee address; City; State; Zip Code 136 Eagle Rock Salado, TX, 76571			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/contract labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/5/14		Payee name Blake Medley			
Amount (\$) \$312.00		Payee address; City; State; Zip Code 2817 Salado St. Austin, TX, 78705			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/contract labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/28/14		Payee name Blake Medley			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 2817 Salado St. Austin, TX, 78705			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/Contract labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/1/14		5 Payee name Billy Jackson			
6 Amount (\$) \$280.00		7 Payee address; City; State; Zip Code 815 W. Slaughter Ln. #226 Austin, TX, 78748			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/2/14		Payee name Worley Printing			
Amount (\$) \$1215.65		Payee address; City; State; Zip Code 3217 N 35, Austin, TX, 78722			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expenses		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/2/14		Payee name Check Mark Typesetting			
Amount (\$) \$982.50		Payee address; City; State; Zip Code 3217 N IH 78722			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expenses		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/5/14		Payee name Jonathan Hernandez			
Amount (\$) \$480.00		Payee address; City; State; Zip Code 5310 Apple Orchard Ln. Austin, TX, 78744			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/Contract Labor		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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